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MOSER, PATTERSON & SHERIDAN, LLP

ATTORNEYS AT LAW
 595 SHREWSBURY AVENUE
 FIRST FLOOR
 SHREWSBURY, NJ 07702
 TELEPHONE (732) 530-9404
 TELEFAX (732) 530-9808

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TO: Commissioner for Patents
 FAX NO.: 703-872-9306
 FROM: Eamon J. Wall
 DATE: November 23, 2004
 MATTER: Serial No. 09/773,263 Filed: February 1, 2001
 DOCKET NO.: WGATE11
 APPLICANT: Gerard K. Kunkel et al.

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<input type="checkbox"/> Petition	<input checked="" type="checkbox"/> Transmittal Letter (2 copies)
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**TRANSMITTAL
FORM**

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Total Number of Pages in This Submission

Application Number

09/773,263

Filing Date

February 1, 2001

First Named Inventor

Gerard K. Kunkel et al.

Art Unit

2614

Examiner Name

Beliveau, Scott E.

Attorney Docket Number

WGATE11

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply – 17 pages <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Facsimile transmission sheet
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